	PATENT APPLICATION FEE DETERMINATION RECORD Efféctive October 1, 2003											
CLAIMS AS FILED - PART I						lumn 2)		SMALL TYPE	ENTITY	 QR		R THAN . ENTITY
TOTAL CLAIMS			16	16		· · ·	ļ	RATE	FEE	7	RATE	FEE
F	OR	NUMBE	NUMBER FILED		BER EXTRA		BASIC FE	E 385.00	OR	BAȘIC FE	770.Q0	
TOTAL CHARGEABLE CLAIMS			721	72 minus 20=		52		X\$ 9=	1	OR	X\$18=	936
ĺΝ	DEPENDENT	2	2 minus 3 =		O	Ċ	X43=	 	OR	X86=	1	
м	ULTIPLE DEP	ENDENT CLAIM I	PRESENT	RESENT		<u></u>		+145=	┪	7		· · ·
ļ	* If the difference in column 1 is less than zero, enter "0" in column 2								 	OR	+290=	
	CLAIMS AS AMENDED - PART II								L	OR	TOTAL	1706
	,	CLAIMS AS / (Column 1)	AMENDE	MENDED - PART II (Column 2) (Column 3)				SMALL	ENTITY	OR	OTHER SMALL	
AMENDMENT A	5-5-01	CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUME PREVIO	ST BER USLY	PRESENT		RATE	TIONAL FEE		RATÉ	ADDI- TIONAL FEE
	Total	. 72	Minus	76		=	M	X\$ 9=	1	OR	X\$18=	
	Independent	1. 2	Minus	3	}	=	1	X43=		OR	X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									1 1		· · · ·
	• • •	•					L	145=	ļ	OR	+290=	
•								DOIT. FEE		JOR ,	ADDIT. FEE	
ENT B	,,,,,	(Column 1) CLAIMS	T	(Colum	ST	(Column 3)	Г		ADDI-	1 [ADDI-
		AFTER AMENDMENT		PREVIOI PAID F	USLY.	PRESENT. EXTRA		RATE	TIONAL FEE		RATE	TIONAL FEE
AMENDMENT	Total	d	Minus	44		=.		X\$ 9≈		OR	X\$18=	
AME	Independent	•	Minus	<u> </u>		=		X43=		OR	X86≃	·
ب	FIRST PRESE	NTATION OF MI	CLAIM		ľ	+1'45=		OR	+290=			
•								TOTAL DOIT, FEE		OR ,	TOTAL ADDIT. FEE	
		(Column 1)		(Columi	n 2)	(Column 3)	~(OUII. PÇEL	·
2		CLAIMS REMAINING AFTER AMENDMENT	·	HIGHES NUMBE PREVIOU PAID FO	ST FR ISLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
MICHERAL	Total	•	Minus	**		=		X\$ 9=		OR .	X\$18=	
	Independent	*	Minus .	***		=	H	X43=		į.	X86=	
	IRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						-	V-70=		OR	V00=	
+145=										OR .	+290=	
→ is c	If the entry in column 1 is less than the entry in column 2, white "0" in column 3. If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT. FEE										TOTAL OIT, FEE	
		nber Previously Pai ber Previously Paid							opriate box		•	.]